

REAL ESTATE EXCISE TAX AFFIDAVIT

This form is your receipt when stamped by cashier.

PLEASE TYPE OR PRINT

CHAPTER 82.45 RCW – CHAPTER 458-61A WAC

THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED

(See back of last page for instructions)

Check box if partial sale of property

If multiple owners, list percentage of ownership next to name.

1 SELLER GRANTOR	Name <u>LYNNE M BLETH</u>	2 BUYER GRANTEE	Name <u>DUANE P BLETH</u>
	Mailing Address <u>2116 4TH AVE</u>		Mailing Address <u>2116 4TH AVE</u>
	City/State/Zip <u>CLARKSTON, WA 99403</u>		City/State/Zip <u>CLARKSTON, WA 99403</u>
	Phone No. (including area code) <u>509-758-5399</u>		Phone No. (including area code) <u>509-758-5399</u>

Send all property tax correspondence to: <input type="checkbox"/> Same as Buyer/Grantee	List all real and personal property tax parcel account numbers – check box if personal property	List assessed value(s)
Name <u>DUANE P BLETH</u>	<u>10412300400030000</u> <input type="checkbox"/>	<u>51,000</u>
Mailing Address <u>2116 4TH AVE</u>	<u>50412300400030010</u> <input type="checkbox"/>	
City/State/Zip <u>CLARKSTON WA 99403</u>		
Phone No. (including area code) <u>509-758-5399</u>		

Street address of property: 2116 4TH AVE

This property is located in unincorporated ASOTIN County OR within city of _____

Check box if any of the listed parcels are being segregated from a larger parcel.

Legal description of property (if more space is needed, you may attach a separate sheet to each page of the affidavit)

SEE ATTACHED.

Select Land Use Code(s):
09
enter any additional codes: _____
(See back of last page for instructions)

Is this property exempt from property tax per chapter 84.36 RCW (nonprofit organization)? YES NO

Is this property designated as forest land per chapter 84.33 RCW? YES NO

Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34? YES NO

Is this property receiving special valuation as historical property per chapter 84.26 RCW? YES NO

If any answers are yes, complete as instructed below.

(1) NOTICE OF CONTINUANCE (FOREST LAND OR CURRENT USE)

NEW OWNER(S): To continue the current designation as forest land or classification as current use (open space, farm and agriculture, or timber) land, you must sign on (3) below. The county assessor must then determine if the land transferred continues to qualify and will indicate by signing below. If the land no longer qualifies or you do not wish to continue the designation or classification, it will be removed and the compensating or additional taxes will be due and payable by the seller or transferor at the time of sale. (RCW 84.33.140 or RCW 84.34.108). Prior to signing (3) below, you may contact your local county assessor for more information.

This land does does not qualify for continuance.

DEPUTY ASSESSOR _____ DATE _____

(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY)

NEW OWNER(S): To continue special valuation as historic property, sign (3) below. If the new owner(s) does not wish to continue, all additional tax calculated pursuant to chapter 84.26 RCW, shall be due and payable by the seller or transferor at the time of sale.

(3) OWNER(S) SIGNATURE

PRINT NAME _____

7 List all personal property (tangible and intangible) included in selling price.

If claiming an exemption, list WAC number and reason for exemption:

WAC No. (Section/Subsection) 458-61A-202 (6)(f)
Reason for exemption INHERITANCE- NON PROBATED WILL

Type of Document WARRANTY DEED

Date of Document 7-15-19

Gross Selling Price \$ _____
*Personal Property (deduct) \$ _____
Exemption Claimed (deduct) \$ _____
Taxable Selling Price \$ _____
Excise Tax : State \$ _____
Local \$ _____
*Delinquent Interest: State \$ _____
Local \$ _____
*Delinquent Penalty \$ _____
Subtotal \$ _____
*State Technology Fee \$ _____ 5.00
*Affidavit Processing Fee \$ _____ 5.00
Total Due \$ _____ (10.00)

02.00

A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX
*SEE INSTRUCTIONS

8 I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Signature of Grantor or Grantor's Agent Duane P Bleth
Name (print) DUANE P BLETH
Date & city of signing: 7-15-19 ASOTIN

Signature of Grantee or Grantee's Agent Duane P Bleth
Name (print) DUANE P BLETH
Date & city of signing: 7-15-19 ASOTIN

Perjury: Perjury is a class C felony which is punishable by imprisonment in the state correctional institution for a maximum term of not more than five years, or by a fine in an amount fixed by the court of not more than five thousand dollars (\$5,000.00), or by both imprisonment and fine (RCW 9A.20.020 (1C)).

DESCRIPTION OF PROPERTY

Part of Lot 4 of Block "G-3-3" of Clarkston Heights, Asotin County, Washington, according to the recorded plat thereof, bounded and described as follows;

From the Southwest corner of said Lot 4, being a point on the centerline of County Road, run North along West line of said Lot 4 a distance of 189.62 feet to a point; Thence East 165.0 feet to a point; Thence Southerly 190 feet, more or less, to a point on the centerline of County Road being 170 feet East of the point of beginning; Thence West on centerline of County Road 170 feet to the point of beginning.

EXCEPTING THEREFROM the following described property:

Part of Lot 4 of Block "G-3-3" of Clarkston Heights, Asotin County, Washington, according to the recorded plat thereof, bounded and described as follows:

From the Southwest corner of said Lot 4, being a point on the centerline of County Road, run North along West line of Lot 4 a distance of 189.62 feet to a point; Thence East 85 feet to a point; Thence Southerly 190 feet more or less, to a point on the centerline of the County Road, being 85 feet East of the point of beginning; Thence West on the centerline of County Road 85 feet to the point of beginning.

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AFFIDAVIT (LACK OF PROBATE)

I DUANE P. BLETH, being first duly sworn, deposes and says:
 The undersigned affiant is the rightful heir to the real property described below, and is HUSBAND
 (relationship to decedent) of LYNN MARIE BLETH (decedent), who died on (date)
6-28-19, at
LEWISTON NEZ PERCE IDAHO
City County State

*** A CERTIFIED COPY OF THE DEATH CERTIFICATE MUST BE PRESENTED. PLEASE NOTE: A copy may be used for recording at the discretion of the county.

REGARDING DISPOSITION OF REAL PROPERTY:

Attach the full legal description of the property with county and parcel number being transferred which is located at a commonly recognized address of: 2116 4TH AVE
Street
Clarkston WA 99403
City State Zip Code

- Decedent left no Last Will and Testament and/or Community Property Agreement; OR Decedent left a Community Property Agreement in favor of surviving spouse (A COPY OF WHICH IS ATTACHED for review), or has been recorded under _____ County recording number _____; OR
- Decedent left a Last Will and Testament which HAS NOT been Probated or Revoked (A COPY OF WHICH IS ATTACHED for review)

“Heirs at law” includes surviving spouse, children, adopted children, issue of predeceased child or adopted child, parents, brothers and sisters of the decedent. Affiant hereby identifies all heirs at law of the decedent: (use additional pages if necessary)

 Full name, age, relationship, address
DUANE P. BLETH 72 HUSBAND
2116 4TH AVE CLARKSTON, WA, 99403
 Full name, age, relationship, address

 Full name, age, relationship, address

 Full name, age, relationship, address

(Continued on next page)

Full name, age, relationship, address

Dated :

Affiant's full name

Telephone number

Street

City

State

Zip Code

Duane P. Bleth

Signature

7-15-19

Date

State of *Washington*

County of *Asotin*

I know or have satisfactory evidence that *Duane P. Bleth*

(name of person)

is the person who appeared before me, and said person acknowledged that (he/she) signed this affidavit and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in this affidavit.

Dated: *7, 15, 19*

Sharlene J. Tiller

Signature of Notary Public

(SEAL OR STAMP)



Residing at: *Asotin, Wa.*

Notary Public in and for the State of *Washington*

My appointment expires: *11, 15, 20*

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STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

STATE OF IDAHO
IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS
CERTIFICATE OF DEATH

Date Filed JULY 03, 2019

State File No. 2019-07149

DECEDENT - LEGAL NAME LYNN MARIE BLETH			
SEX FEMALE	SOCIAL SECURITY NUMBER 519-68-0859	AGE 64 YEARS	DATE OF BIRTH MAY 22, 1955
BIRTH-PLACE LEWISTON, IDAHO		PLACE OF RESIDENCE LEWISTON, IDAHO	
MARITAL STATUS AT TIME OF DEATH MARRIED	NAME OF SURVIVING SPOUSE (If wife, maiden name) DUANE PAUL BLETH		WAS DECEDENT EVER IN U.S. ARMED FORCES? NO

FATHER - NAME WAYNE BOUVIER PARIS	BIRTH-PLACE IDAHO
MOTHER - MAIDEN NAME BETTE CAROL LINTALA	BIRTH-PLACE IDAHO

METHOD OF DISPOSITION CREMATION	FUNERAL SERVICE LICENSEE DENNIS W. HASTINGS
NAME AND ADDRESS OF FUNERAL FACILITY VASSAR-RAWLS FUNERAL HOME, LEWISTON, IDAHO	

DATE OF DEATH JUNE 27, 2019	TIME OF DEATH 5:55 P.M.	CITY, TOWN OR LOCATION OF DEATH LEWISTON, IDAHO	COUNTY OF DEATH NEZ PERCE
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CAUSE OF DEATH (underlying cause last) a. DEMENTIA	Approximate Interval Between Onset and Death
b. DUE TO (or as a consequence of): HYPERTENSION	
c. DUE TO (or as a consequence of): HEAD INJURY DUE TO FALL	
d. DUE TO (or as a consequence of):	

OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above NONE STATED	WAS AN AUTOPSY PERFORMED? NO
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MANNER OF DEATH ACCIDENT	NAME OF CERTIFIER JOSHUA T. HALL	TITLE CORONER
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CORONER SUBSEQUENT CERTIFICATION IF NECESSARY

EXTERNAL CAUSES ONLY			
DATE OF INJURY JUNE 23, 2019	TIME OF INJURY 5:23 A.M.	PLACE OF INJURY CARE FACILITY	INJURY AT WORK? NO
LOCATION WHERE INJURY OCCURRED 2221 VINYARD AVENUE, LEWISTON, IDAHO			
DESCRIPTION OF HOW INJURY OCCURRED DECEDENT FELL OUT OF WHEELCHAIR INJURING HER HEAD			

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF VITAL RECORDS AND HEALTH STATISTICS.

DATE ISSUED: JULY 03, 2019

James B. Aydelotte
JAMES B. AYDELOTTE
STATE REGISTRAR

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This copy not valid unless prepared on engraved border displaying state seal and signature of the Registrar.



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